



Form No. 1 SPC
(A/02-09)

Town of Spencer

*90 N West Street
Spencer, Indiana 47460
Phone (812) 829-3213*

INSTRUCTIONS

It is strongly advised that any person seeking a rezoning of their property first contact the Town of Spencer who will explain the review process and potential issues.

Fill out the Application for Rezoning in its entirety. Information regarding the property can be verified in the Owen County Auditor's office. After preparation of the application return the application to the Spencer Municipal Building at least 15 days prior to the next regularly scheduled meeting of the Plan Commission.

Rezoning Request No.

TOWN OF SPENCER PLAN COMMISSION APPLICATION FOR REZONING

This application must be submitted with the required application fee. All fees are non-refundable regardless of the outcome of the request.

APPLICANTS		
Name:		
Address:		
City:	State:	Zip Code:
Telephone #:	FAX #:	Email:
OWNERS AS SHOWN ON COUNTY TAX RECORDS		
Name:		
Address:		
City	State:	Zip Code:
Telephone #:	FAX #:	Email:
PROPERTY INFORMATION		
Property Address:		
Parcel#	Lot Size/Acreage:	
Is this property located in a subdivision? <input type="checkbox"/> YES <input type="checkbox"/> NO		
CURRENT ZONING CLASSIFICATION		
<input type="checkbox"/> Agricultural District (A-1) <input type="checkbox"/> Business and Light Manufacturing District (BLM-1) <input type="checkbox"/> Industrial District (I-1) <input type="checkbox"/> Residential (select one) <input type="checkbox"/> R-1 <input type="checkbox"/> R-2		
REQUESTED REZONE CLASSIFICATION		
<input type="checkbox"/> Agricultural District (A-1) <input type="checkbox"/> Business and Light Manufacturing District (BLM-1) <input type="checkbox"/> Industrial District (I-1) <input type="checkbox"/> Residential (select one) <input type="checkbox"/> R-1 <input type="checkbox"/> R-2		

Please state reason for Rezone request:

Rezone Request No.

I swear or affirm under the penalties for perjury, that the foregoing representations are true to the best of my knowledge and belief.

Applicant Signature

Date

Printed Name

I authorize this application and authorize the Plan Commission, Board of Zoning Appeals, its staff, and such other persons as the staff may deem appropriate to enter upon the property involved in this request for the purpose of analyzing this request.

Owner Signature

Date

Printed Name

Owner Signature

Date

Printed Name

*The following documentation is to be supplied at the time of submission of the Rezone application:

- ☐ Deed
- ☐ Site Plan (must include any property improvements, septic placement, set backs, and any other intended uses)
- ☐ Certified List of adjacent landowners
- ☐ Authorization of Owner, if not fee simple owner
- ☐ Copy of Restrictive Covenants if property is in subdivision
- ☐ Application Fee (Non-refundable)

OFFICE USE ONLY

Initial on-site inspection complete? ☐ YES ☐ NO By whom: _____

Recommendations or Requirements:

THIS INSTRUMENT PREPARED BY: Richard W. Lorenz, Attorney at Law, Spencer, Indiana

Legal Notice Example

LEGAL NOTICE

TOWN OF SPENCER PLAN COMMISSION

The Town of Spencer Plan Commission will meet on the _____ day of _____, 20____ at _____ : _____ o'clock a.m./ p.m in the Spencer Municipal Building, 90 N West Street, Spencer, Indiana in order to hear the following application:

Rezone Request No. _____

A request for rezoning in order to: [state reason for the rezone]

This application for a rezone request may be examined in the office of the Spencer Town Clerk/Treasurer, Spencer Municipal Building, 90 N West Street, Spencer, Indiana.

Interested parties may offer an oral opinion at the Hearing or may file a written comment concerning the matter to be heard prior to the Hearing.

Petitioner(s) Name

Date

Notice to Adjacent Landowners Example

Date

VIA CERTIFIED MAIL

Name of adjacent landowner

Address

City, State, Zip

RE: Rezone Request for

Dear Name:

Name will be appearing on the day of , 20 at : o'clock
a.m./ p.m before the Town of Spencer Plan Commission to discuss Rezone Request No. .
A request for a rezone in order to:[state reason for the rezone]

This application for a rezone request may be examined in the office of the Spencer Town
Clerk/Treasurer, Spencer Municipal Building, 90 N West Street, Spencer, Indiana.

As an interested party and adjacent owner you are invited to attend the meeting at said
date and time to voice your approval or any concerns that you may have regarding this matter.

Thank you for attention to this matter herein.

Sincerely,